Approved, SCAO OSM CODE: RGW, DIS

STATE OF MICHIGAN PROBATE COURT COUNTY

RECEIPT OF WARD AND DISCHARGE

COUNTY CIRCUIT COURT - FAMILY DIVISION	RECEIFT OF WAR	TO AND DISCHARGE	
In the matter of			, a protected individual
I am an adult . I have received from my guardian or conservator, the follows:	Name		,
It is the balance of the estate due m	ne in full.		
2. I REQUEST that my guardianship of	or conservatorship be te	erminated.	
Date		Signature	
		Address	
		City, state, zip	Telephone no.
	OF	RDER	
IT IS ORDERED the guardianship and the bond, if any, is cancelled.	d/or conservatorship is	terminated, the guardian a	nd/or conservator is discharged and
Date		Judge	Bar no.
Attorney name (type or print)	Bar no.		
Address			
City, state, zip	Telephone no.		